

## **CDBG PLANNING GRANT APPLICATION FORM**

### **MONTANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM MONTANA DEPARTMENT OF COMMERCE – COMMUNITY DEVELOPMENT DIVISION**

#### **ACCEPTANCE OF CDBG PROGRAM REQUIREMENTS**

The Applicant hereby certifies that:

It will comply with all applicable parts of Title I of the Federal Housing and Community Development Act of 1974, as amended, which have not been cited herein, as well as with other applicable federal laws and regulations.

It will comply with all requirements established by the Montana Department of Commerce and applicable State laws, regulations, and administrative procedures.

It accepts the terms, conditions, selection criteria, and procedures established by the Montana Community Development Block Grant (CDBG) Program and expressly waives any statutory or common law right it may have to challenge the legitimacy and propriety of these terms, conditions, criteria, and procedures in the event that it is not selected for an award of CDBG funds.

#### **APPLICANT- CERTIFICATION**

To the best of my knowledge and belief, the information provided in this application and in the attached documents is true and correct.

**Signature** \_\_\_\_\_  
**Chief Elected Official or Authorized Representative**

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Date** \_\_\_\_\_

<b>Eligible Applicant's Information [See Guidelines, page 3]</b>	
1. Name of Local Government and Chief Elected Official	
Phone #/email address	
Mailing Address	
Federal Tax ID #	
DUNS Number	
2. Name of Sub-recipient or Assisted Business (if applicable) and primary contact	
Phone #/email address	

Mailing Address	
DUNS #	
North American Industrial Classification System (NAICS) Code	
<b>Primary Contact Person/Grant Administrator (if not already listed above)</b>	
Name	
Affiliation	
Job Title	
Phone #/email address	
Mailing Address	

<b>CDBG Planning Grant Funds Requested: \$ _____</b>		
<input type="checkbox"/> Community Benefit – 1:3 match required <input type="checkbox"/> Site-Specific/Private Entity Benefit – 1:1 match required (Note: Required matching funds and amounts must be included in this preliminary budget)		
<b>BUDGET</b>		
OTHER FUNDING SOURCES:	AMOUNT	STATUS OF COMMITMENT (Pending or Firm)
CDBG Requested Funds	\$	
Local match (required; see above)	\$	
{Name of Matching Funds, if not local}	\$	
	\$	
TOTAL ESTIMATED PROJECT COST	\$	

**PROVIDE A BRIEF DESCRIPTION OF THE PROPOSED PLANNING ACTIVITY AND COMMUNITY/ENTITY BENEFIT:** (Describe what the final work product will be and provide a description of the items that make up the work scope. A more thorough description may be necessary if the planning activity is for a product other than a CCIP, growth policy or PAR/PER. Include a discussion regarding the schedule including when key project milestones will be started and completed, see Exhibit 1.) Please limit the response to this description of the proposed planning activity to a maximum of two pages,

**REQUIRED DOCUMENTATION TO BE SUBMITTED WITH APPLICATION (AS APPLICABLE):**

- I. WAIVER OF MATCH REQUESTED? If waiver of match is requested, provide supporting documentation and narrative justification as part of the budget narrative. *[See Guidelines, page 5.]*
- II. LETTER(S) OF COMMITMENT *[For funds or resources to be provided by a non- profit agency, water and sewer district, or similar organization; see Guidelines, page 5.]*
- III. PROJECT IMPLEMENTATION SCHEDULE *[Provide a project implementation schedule using Exhibit 1 attached. Include a brief narrative to explain your proposed project schedule.]*
- IV. PROPOSED PROJECT BUDGET AND BUDGET JUSTIFICATION NARRATIVE *[Use Exhibit 2 attached to list your project budget and to provide a detailed narrative that explains and justifies each line item of your proposed budget.]*
- V. DETERMINATION OF ENVIRONMENTAL EXEMPTION *[Provide a resolution or letter, signed by the chief elected official, documenting determination of environmental exemption, using Exhibit 3-A and 3-B]*

## PROJECT PROPOSAL

Using separate sheets, applicants must address each of the questions below. Applicants are encouraged to review community development objectives outlined within the Annual Action Plan for Montana's Consolidated Plan; Community Planning staff will be reviewing all applications to determine that the proposed project meets the objectives of the Annual Action Plan for Montana's Consolidated Plan.

If a question is not applicable to the proposed planning project, the applicant must briefly address why it is not applicable. Links to supplemental documents or community – specific data and related information are encouraged to help support or illustrate the planning activity that funding is being requested for. Please limit the responses to the questions (A.1 through A.5 and B) below to a maximum of two pages each.

- A. Address the following elements as they relate to the proposed planning project, providing references and supplemental documentation as necessary to adequately illustrate a response:
  - 1. The need for financial assistance to complete the planning project;
  - 2. The fiscal capacity of the applicant to meet the grant conditions required by the Department, including but not limited to its ability to manage the planning project and demonstrate the use of generally accepted accounting principles;
  - 3. Past efforts to ensure sound, effective, long-term community wide planning;
  - 4. The demonstrated importance of, and the community's current support for, the planning project.
  - 5. Relation of planning project to business expansion or retention, specifically the number of potential jobs created or retained as a result of the proposed planning effort.
- B. Describe the intended outcome of the proposed planning project; how will the receipt of planning grant funds have a positive impact on the applicant community, and what steps will be taken following the conclusion of the planning activity (additional grant funds sought, implementation, construction, etc.)?

Alternative accessible formats of this document will be provided upon request. If you need this document in an alternative format, such as large print, Braille, audio tape, or computer diskette, please contact the Montana Department of Commerce Community Development Division at (406) 841-2770, TDD (406) 841-2702, or the Relay Services number, 711.

The Department of Commerce does not discriminate on the basis of disability in admission to, access to, or operations of its program, services, or activities. Individuals, who need aids or services for effective communication or need other disability-related accommodations in the programs and services offered, are invited to make their needs and preferences known. Please provide as much advance notice as possible for requests.

**EXHIBIT I  
CDBG COMMUNITY PLANNING GRANTS  
PROJECT IMPLEMENTATION SCHEDULE**

<b><u>TASK</u></b>	<b><u>MONTH</u></b>
<b><u>PROJECT START UP</u></b>	
Preparation of MDOC Contract	
<b><u>PROCUREMENT OF PROFESSIONAL ASSISTANCE</u></b>	
<i>Including professional engineers, architects, and planning consultants, etc.</i>	
Submit Request for Proposals (RFP) to DOC for review  <i>(Architectural and engineering services must be procured in compliance with Section 18-8-201, MCA)</i>	
Publish RFP or RFQ/Conduct limited solicitation	
Select professional	
Execute agreement with professional	
<b><u>PROJECT IMPLEMENTATION</u></b>	
Prepare draft plan/report	
Submit interim Request for Funds, and 50% draft of final product (digital copy)	
Public review and comment	
Finalize plan/report	
<b><u>PROJECT CLOSEOUT</u></b>	
Submit final product, both in digital and printed formats Submit final Request for Funds and Project Completion Report	

**EXHIBIT 2  
CDBG COMMUNITY PLANNING GRANTS  
PRELIMINARY PROJECT BUDGET & NARRATIVE**

<b>APPLICANT NAME</b>				
	<b>SOURCE: CDBG</b>	<b>SOURCE: Match (Specify)</b>	<b>SOURCE:</b>	<b>TOTAL</b>
Status of non-CDBG funds ( <i>Pending or Firm</i> )				
<b>Professional Planning Activities</b>				
<b>Professional Architectural/Engineering Services</b>				
<b>Other (Describe)</b>				
<b>TOTAL PLANNING PROJECT</b>	\$	\$	\$	\$

**Note –** Because the amount of funding is limited, applicants will be expected to absorb most costs associated with the administration of the CDBG Planning Grant.

The budget justification narrative must thoroughly explain the rationale or basis for all proposed budget costs for each line item. Quotes from qualified professionals may be requested by MDOC to justify the proposed budget; applicants are encouraged to provide estimates from qualified contractors as part of the application package, in support of the amount of funds requested. The thoroughness of the budget justification will be a consideration in the review of the application. **The budget for the planning project must be accompanied by a detailed narrative that explains:**

- 1) The justification for each budget line item for the CDBG funds requested;
- 2) Local matching funds; and
- 3) Other sources and amounts of local, state, federal, or private funds to be involved.

Reminder: Planning grants may not be used for reimbursement of activities undertaken or completed prior to the date of announcement of grant award by the Department of Commerce.

**Budget Justification Narrative Response (response below or attached):**

**EXHIBIT 3-A  
CDBG COMMUNITY PLANNING GRANTS  
DESIGNATION OF ENVIRONMENTAL CERTIFYING OFFICIAL**

*(Sample - To Be Completed on Local Government Letterhead)*

*(Date)*

*(Name of CDBG Program Contact)*  
Montana Department of Commerce  
Community Development Division  
301 S. Park  
P.O. Box 200523  
Helena, MT 59620

Dear *(Name of CDBG Program Specialist)*:

This is to notify you that \_\_\_\_\_ *(Name)* \_\_\_\_\_, \_\_\_\_\_ *(Title)* \_\_\_\_\_, is designated as the Environmental Certifying Official responsible for all activities associated with the environmental review process to be completed in conjunction with the 201\_\_ CDBG grant awarded to \_\_\_\_\_ *(Name of Grantee)* \_\_\_\_\_, Montana.

Sincerely,

\_\_\_\_\_  
Signature\*

\_\_\_\_\_  
Typed Name and Title

*\*The chief elected official should sign this letter (mayor or chairperson of county commission).*

**EXHIBIT 3-B**  
**CDBG COMMUNITY PLANNING GRANTS**  
**FINDING OF EXEMPT ACTIVITIES**

*(Sample - Complete on Local Government Letterhead)*

*(Date)*

*(Name of CDBG liaison)*

Montana Department of Commerce  
Community Development Division  
301 S. Park  
P.O. Box 200523  
Helena, MT 59620-0523

Dear *(Name of CDBG Contact )*:

It is the finding of the *(Name of Grantee: City, Town or County of \_\_\_\_\_)*, Montana, that the following activities approved for funding under the Montana CDBG program are defined as exempt activities under 24 Part 58.34, and meet the conditions specified therein for such exemption, of the Environmental Review Process for Title I Community Development Block Grant Programs, and that these activities are in compliance with the environmental requirements of related federal authorities. The activities and the statutory authority for exemption are listed below:

List applicable activities, descriptions, and authority. **For example:**

*1. Planning activities to include preparation of a preliminary engineering report.*

*Authority -- Section 58.34(a)(1): Environmental and other studies, resource identification and the development of plans and strategies.*

Sincerely,

\_\_\_\_\_  
Signature of Environmental Certifying  
Official or Chief Elected Official